

Fill in this information to identify the case:

Debtor Name Scott A. Thomas

United States Bankruptcy Court for the: Eastern District of Pennsylvania



Case number: 21-12333-pmm

☐ Check if this is an amended filing

Official Form 425C

Monthly Operating Report for Small Business Under Chapter 11

12/17

Month: August

Date report filed: 09/22/2021
MM / DD / YYYY

Line of business: retail restaurant

NAISC code: _____

In accordance with title 28, section 1746, of the United States Code, I declare under penalty of perjury that I have examined the following small business monthly operating report and the accompanying attachments and, to the best of my knowledge, these documents are true, correct, and complete.

Responsible party:

Scott A. Thomas

Original signature of responsible party

Scott A. Thomas

Printed name of responsible party

Scott A. Thomas

1. Questionnaire

Answer all questions on behalf of the debtor for the period covered by this report, unless otherwise indicated.

	Yes	No	N/A
If you answer No to any of the questions in lines 1-9, attach an explanation and label it Exhibit A.			
1. Did the business operate during the entire reporting period?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Do you plan to continue to operate the business next month?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Have you paid all of your bills on time?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Did you pay your employees on time?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Have you deposited all the receipts for your business into debtor in possession (DIP) accounts?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Have you timely filed your tax returns and paid all of your taxes?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Have you timely filed all other required government filings?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Are you current on your quarterly fee payments to the U.S. Trustee or Bankruptcy Administrator?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9. Have you timely paid all of your insurance premiums?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If you answer Yes to any of the questions in lines 10-18, attach an explanation and label it Exhibit B.			
10. Do you have any bank accounts open other than the DIP accounts?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Have you sold any assets other than inventory?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12. Have you sold or transferred any assets or provided services to anyone related to the DIP in any way?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13. Did any insurance company cancel your policy?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14. Did you have any unusual or significant unanticipated expenses?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15. Have you borrowed money from anyone or has anyone made any payments on your behalf?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16. Has anyone made an investment in your business?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Debtor Name Scott A. Thomas

Case number 21-12333-pmm

17. Have you paid any bills you owed before you filed bankruptcy?

☒ ☐ ☐

18. Have you allowed any checks to clear the bank that were issued before you filed bankruptcy?

☒ ☐ ☐

2. Summary of Cash Activity for All Accounts

19. Total opening balance of all accounts

\$ 1,095.65

This amount must equal what you reported as the cash on hand at the end of the month in the previous month. If this is your first report, report the total cash on hand as of the date of the filing of this case.

20. Total cash receipts

Attach a listing of all cash received for the month and label it *Exhibit C*. Include all cash received even if you have not deposited it at the bank, collections on receivables, credit card deposits, cash received from other parties, or loans, gifts, or payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit C*.

Report the total from *Exhibit C* here.

\$ 8,335.09

21. Total cash disbursements

Attach a listing of all payments you made in the month and label it *Exhibit D*. List the date paid, payee, purpose, and amount. Include all cash payments, debit card transactions, checks issued even if they have not cleared the bank, outstanding checks issued before the bankruptcy was filed that were allowed to clear this month, and payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit D*.

Report the total from *Exhibit D* here.

- \$ 7,665.24

22. Net cash flow

Subtract line 21 from line 20 and report the result here.

+ \$ 669.85

This amount may be different from what you may have calculated as *net profit*.

23. Cash on hand at the end of the month

Add line 22 + line 19. Report the result here.

= \$ 1,765.50

Report this figure as the *cash on hand at the beginning of the month* on your next operating report.

This amount may not match your bank account balance because you may have outstanding checks that have not cleared the bank or deposits in transit.

3. Unpaid Bills

Attach a list of all debts (including taxes) which you have incurred since the date you filed bankruptcy but have not paid. Label it *Exhibit E*. Include the date the debt was incurred, who is owed the money, the purpose of the debt, and when the debt is due. Report the total from *Exhibit E* here.

24. Total payables

\$ 0.00

(*Exhibit E*)

Debtor Name Scott A. Thomas

Case number 21-12333-pmm

4. Money Owed to You

Attach a list of all amounts owed to you by your customers for work you have done or merchandise you have sold. Include amounts owed to you both before, and after you filed bankruptcy. Label it *Exhibit F*. Identify who owes you money, how much is owed, and when payment is due. Report the total from *Exhibit F* here.

25. Total receivables \$ 0.00
(Exhibit F)

5. Employees

26. What was the number of employees when the case was filed? 5
27. What is the number of employees as of the date of this monthly report? 5

6. Professional Fees

28. How much have you paid this month in professional fees related to this bankruptcy case? \$ 10,000.00
29. How much have you paid in professional fees related to this bankruptcy case since the case was filed? \$ 0.00
30. How much have you paid this month in other professional fees? \$ 0.00
31. How much have you paid in total other professional fees since filing the case? \$ 0.00

7. Projections

Compare your actual cash receipts and disbursements to what you projected in the previous month. Projected figures in the first month should match those provided at the initial debtor interview, if any.

	<u>Column A</u>		<u>Column B</u>		<u>Column C</u>
	Projected	—	Actual	=	Difference
	Copy lines 35-37 from the previous month's report.		Copy lines 20-22 of this report.		Subtract Column B from Column A.
32. Cash receipts	\$ _____	—	\$ _____	=	\$ _____
33. Cash disbursements	\$ _____	—	\$ _____	=	\$ _____
34. Net cash flow	\$ _____	—	\$ _____	=	\$ _____
35. Total projected cash receipts for the next month:					\$ _____
36. Total projected cash disbursements for the next month:					— \$ _____
37. Total projected net cash flow for the next month:					= \$ _____

Debtor Name Scott A. Thomas

Case number 21-12333-pmm

8. Additional Information

If available, check the box to the left and attach copies of the following documents.

- ☒ 38. Bank statements for each open account (redact all but the last 4 digits of account numbers).
- ☐ 39. Bank reconciliation reports for each account.
- ☐ 40. Financial reports such as an income statement (profit & loss) and/or balance sheet.
- ☐ 41. Budget, projection, or forecast reports.
- ☐ 42. Project, job costing, or work-in-progress reports.

Schedule C

Cash Sales

Credit Card

8/24/21- \$202.23

8/25/21 - \$311.85

\$295.88

8/26/21- \$280.13

\$390.20

8/27/21- \$374.54

\$446.09

8/28/21- \$405.86

\$283.54

8/29/21- \$716.61

\$1,189.40

8/30/21- \$1,132.51

\$1,705.33

8/31/21- \$322.06

\$278.86

Total: \$3,745.79

\$4,589.30

Total: \$8,335.09

Schedule D:

CASH:

8/28 - 211.00 HEARTH BAKERY - BREAD & ROLLS

8/28 - 190.89 Bimbo - BREAD & ROLLS

CHECK:

8/24 - #399 - 1527.48 GROLL FOODS - Food

8/25 - #398 - 785.14 RTR PROVISIONS - MEAT

8/31 - #337 - 1676.22 SYSCO FOODS - Food

8/31 - #347 - 2637.80 GROLL FOODS - Food

8/31 - #401 - 300.00 GOLDEN MALTED WAFFLE - WAFFLE MIX

8/31 - #402 - 172.00 ELLIS COFFEE - COFFEE

REDIT CARD:

8/30 - 22.42 AMAZON - PAPER

8/30 - 44.95 AMZN - BARIOMIL VITAMIN

8/30 - 57.90 AMAZON - INK CART.

8/30 - 31.80 AMAZON - TRAFFIC OIL

8/30 - 7.64 AMAZON - WOOD SHEDS



Page 1 of 3 08/31/21
PA 1390010863208



719-71-01-00 20195 0 C 001 30 50 004
SCOTT A THOMAS
DBA STRAWBERRY FAMILY RESTAURANT
3152 MIDDLE CREEK RD
GILBERTSVILLE PA 19525-9465

Your account statement

For 08/31/2021

Contact us



BBT.com



(800) BANK-BBT or
(800) 226-5228

Coming soon

Important information about your transition from BB&T to Truist is on the way. You'll receive your details by mail in September 2021.

©2021, Truist Financial Corporation. Truist Bank, Member FDIC.

Account summary

Your previous balance as of 07/30/2021	\$1,546.77
Checks	- 18,711.70
Other withdrawals, debits and service charges	- 4,722.34
Deposits, credits and interest	+ 24,788.20
Your new balance as of 08/31/2021	= \$2,900.93

Checks

DATE	CHECK #	AMOUNT(\$)
08/03	336	472.88
08/31	337	1,676.22
08/05	*341	80.07
08/16	*345	735.74
08/23	346	92.80
08/31	347	2,637.60
08/02	*383	604.80
08/05	*385	830.80

DATE	CHECK #	AMOUNT(\$)
08/02	*387	375.43
08/09	388~	
08/04	389	634.28
08/10	390	2,852.50
08/03	391	89.00
08/09	392	396.40
08/19	393	2,314.19
08/17	394	1,156.79

DATE	CHECK #	AMOUNT(\$)
08/16	395	388.00
08/16	396	94.38
08/18	397	94.00
08/25	398	1,527.48
08/24	399	785.14
08/23	400	401.20
08/31	401	300.00
08/31	402	172.00

* indicates a skip in sequential check numbers above this item

~ indicates an electronically converted check. See "Other withdrawals, debits and service charges"

Total checks = \$18,711.70

Other withdrawals, debits and service charges

DATE	DESCRIPTION	AMOUNT(\$)
08/02	DEBIT CARD PURCHASE AMZN Mkt US*2P7R3 07-30 Amzn.com/bill WA 4490	67.72
08/04	DEBIT CARD PURCHASE RESTAURANTSTORE.CO 08-02 717-392-7974 PA 4490	510.69
08/04	INTERNET PAYMENT ACH WHITETAIL DISPOS 610-754-0103	800.00
08/09	CONVERTED CHECK - ARC PAYMENT CMS MEDICARE 0388388	594.00
08/11	FE ECHECK FIRSTENERGY OPCO 4651 THOMAS SCOTT A	449.01
08/13	ACH CORP DEBIT ELEC BILL PP STRAWBERRY FAMILY RE CUSTOMER ID 1154021030	1,500.00
08/19	DEBIT CARD PURCHASE RESTAURANTSTORE.CO 08-18 717-392-7974 PA 4490	730.02
08/19	PRIOR DAY OD FEE-\$36/ITM	36.00

continued

(continued)

DATE	DESCRIPTION	AMOUNT(S)
08/23	DEBIT CARD PURCHASE 001 DEBTORCC INC 08-21 201-2289040 NJ 4490	34.90
Total other withdrawals, debits and service charges		= \$4,722.34

Deposits, credits and interest

DATE	DESCRIPTION	AMOUNT(S)
08/02	210802P2 Square Inc Strawberry Family Rest CUSTOMER ID L208643907353	900.94
08/02	210802P2 Square Inc Strawberry Family Rest CUSTOMER ID L208643907354	2,680.66
08/03	210803P2 Square Inc Strawberry Family Rest CUSTOMER ID L208644254677	340.60
08/04	210804P2 Square Inc Strawberry Family Rest CUSTOMER ID L208644507067	299.88
08/05	210805P2 Square Inc Strawberry Family Rest CUSTOMER ID L208644822495	215.18
08/06	210806P2 Square Inc Strawberry Family Rest CUSTOMER ID L208645157640	596.71
08/09	210809P2 Square Inc Strawberry Family Rest CUSTOMER ID L208645737806	626.27
08/09	210809P2 Square Inc Strawberry Family Rest CUSTOMER ID L208645737807	2,688.73
08/10	210810P2 Square Inc Strawberry Family Rest CUSTOMER ID L208646092874	558.19
08/11	210811P2 Square Inc Strawberry Family Rest CUSTOMER ID L208646335927	376.93
08/12	210812P2 Square Inc Strawberry Family Rest CUSTOMER ID L208646652045	330.46
08/13	210813P2 Square Inc Strawberry Family Rest CUSTOMER ID L208647026848	356.00
08/16	210816P2 Square Inc Strawberry Family Rest CUSTOMER ID L208647574205	672.93
08/16	210816P2 Square Inc Strawberry Family Rest CUSTOMER ID L208647574206	2,696.36
08/17	210817P2 Square Inc Strawberry Family Rest CUSTOMER ID L208647898780	271.66
08/18	210818P2 Square Inc Strawberry Family Rest CUSTOMER ID L208648180135	357.01
08/19	DEBIT CARD RETURN RESTAURANTSTORE.CO 08-17 717-3927974 PA 4490	14.30
08/19	210819P2 Square Inc Strawberry Family Rest CUSTOMER ID L208648543595	436.48
08/20	210820P2 Square Inc Strawberry Family Rest CUSTOMER ID L208648826274	350.87
08/23	210823P2 Square Inc Strawberry Family Rest CUSTOMER ID L208649420618	628.39
08/23	DEPOSIT	1,400.00
08/23	210823P2 Square Inc Strawberry Family Rest CUSTOMER ID L208649420619	3,183.62
08/24	210824P2 Square Inc Strawberry Family Rest CUSTOMER ID L208649748946	216.73
08/25	210825P2 Square Inc Strawberry Family Rest CUSTOMER ID L208649999151	283.54
08/26	210826P2 Square Inc Strawberry Family Rest CUSTOMER ID L208650324489	295.88
08/27	210827P2 Square Inc Strawberry Family Rest CUSTOMER ID L208650668039	390.20
08/30	210830P2 Square Inc Strawberry Family Rest CUSTOMER ID L208651236522	446.09
08/30	210830P2 Square Inc Strawberry Family Rest CUSTOMER ID L208651236523	2,894.73
08/31	210831P2 Square Inc Strawberry Family Rest CUSTOMER ID L208651581487	278.86
Total deposits, credits and interest		= \$24,788.20

Fill in this information to identify the case:

Debtor Name Scott A. Thomas

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number: 21-12333-elf

☐ Check if this is an amended filing

Official Form 425C

Monthly Operating Report for Small Business Under Chapter 11

12/17

Month: Sept. 2021

Date report filed: 11/12/2021
MM/DD/YYYY

Line of business: Retail Restaurant

NAISC code: _____

In accordance with title 28, section 1746, of the United States Code, I declare under penalty of perjury that I have examined the following small business monthly operating report and the accompanying attachments and, to the best of my knowledge, these documents are true, correct, and complete.

Responsible party: Scott A. Thomas

Original signature of responsible party

Scott A. Thomas

Printed name of responsible party

Scott A. Thomas

1. Questionnaire

Answer all questions on behalf of the debtor for the period covered by this report, unless otherwise indicated.

	Yes	No	N/A
If you answer No to any of the questions in lines 1-9, attach an explanation and label it Exhibit A.			
1. Did the business operate during the entire reporting period?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Do you plan to continue to operate the business next month?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Have you paid all of your bills on time?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Did you pay your employees on time?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Have you deposited all the receipts for your business into debtor in possession (DIP) accounts?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Have you timely filed your tax returns and paid all of your taxes?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Have you timely filed all other required government filings?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Are you current on your quarterly fee payments to the U.S. Trustee or Bankruptcy Administrator?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9. Have you timely paid all of your insurance premiums?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If you answer Yes to any of the questions in lines 10-18, attach an explanation and label it Exhibit B.			
10. Do you have any bank accounts open other than the DIP accounts?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Have you sold any assets other than inventory?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12. Have you sold or transferred any assets or provided services to anyone related to the DIP in any way?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13. Did any insurance company cancel your policy?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14. Did you have any unusual or significant unanticipated expenses?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15. Have you borrowed money from anyone or has anyone made any payments on your behalf?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16. Has anyone made an investment in your business?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Debtor Name Scott A. Thomas

Case number 21-12333-elf

17. Have you paid any bills you owed before you filed bankruptcy? ☐ ☒ ☐
18. Have you allowed any checks to clear the bank that were issued before you filed bankruptcy? ☒ ☐ ☐

2. Summary of Cash Activity for All Accounts

19. Total opening balance of all accounts

\$ 1,765.50

This amount must equal what you reported as the cash on hand at the end of the month in the previous month. If this is your first report, report the total cash on hand as of the date of the filing of this case.

20. Total cash receipts

Attach a listing of all cash received for the month and label it *Exhibit C*. Include all cash received even if you have not deposited it at the bank, collections on receivables, credit card deposits, cash received from other parties, or loans, gifts, or payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit C*.

Report the total from *Exhibit C* here.

\$ 42,317.82

21. Total cash disbursements

Attach a listing of all payments you made in the month and label it *Exhibit D*. List the date paid, payee, purpose, and amount. Include all cash payments, debit card transactions, checks issued even if they have not cleared the bank, outstanding checks issued before the bankruptcy was filed that were allowed to clear this month, and payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit D*.

Report the total from *Exhibit D* here.

- \$ 41,016.88

22. Net cash flow

Subtract line 21 from line 20 and report the result here.

+ \$ 1,300.94

This amount may be different from what you may have calculated as *net profit*.

23. Cash on hand at the end of the month

Add line 22 + line 19. Report the result here.

= \$ 3,066.94

Report this figure as the *cash on hand at the beginning of the month* on your next operating report.

This amount may not match your bank account balance because you may have outstanding checks that have not cleared the bank or deposits in transit.

3. Unpaid Bills

Attach a list of all debts (including taxes) which you have incurred since the date you filed bankruptcy but have not paid. Label it *Exhibit E*. Include the date the debt was incurred, who is owed the money, the purpose of the debt, and when the debt is due. Report the total from *Exhibit E* here.

24. Total payables

\$ 4,449.96

(*Exhibit E*)

Debtor Name Scott A. Thomas

Case number 21-12333-elf

4. Money Owed to You

Attach a list of all amounts owed to you by your customers for work you have done or merchandise you have sold. Include amounts owed to you both before, and after you filed bankruptcy. Label it *Exhibit F*. Identify who owes you money, how much is owed, and when payment is due. Report the total from *Exhibit F* here.

25. Total receivables \$ 0.00
(Exhibit F)

5. Employees

26. What was the number of employees when the case was filed? 5
27. What is the number of employees as of the date of this monthly report? 5

6. Professional Fees

28. How much have you paid this month in professional fees related to this bankruptcy case? \$ 0.00
29. How much have you paid in professional fees related to this bankruptcy case since the case was filed? \$ 10,000.00
30. How much have you paid this month in other professional fees? \$ 0.00
31. How much have you paid in total other professional fees since filing the case? \$ _____

7. Projections

Compare your actual cash receipts and disbursements to what you projected in the previous month. Projected figures in the first month should match those provided at the initial debtor interview, if any.

	<u>Column A</u>		<u>Column B</u>		<u>Column C</u>
	Projected	—	Actual	=	Difference
	Copy lines 35-37 from the previous month's report.		Copy lines 20-22 of this report.		Subtract Column B from Column A.
32. Cash receipts	\$ _____	—	\$ _____	=	\$ _____
33. Cash disbursements	\$ _____	—	\$ _____	=	\$ _____
34. Net cash flow	\$ _____	—	\$ _____	=	\$ _____
35. Total projected cash receipts for the next month:					\$ _____
36. Total projected cash disbursements for the next month:					\$ _____
37. Total projected net cash flow for the next month:					\$ _____

Debtor Name Scott A. Thomas

Case number 21-12333-elf

8. Additional Information

If available, check the box to the left and attach copies of the following documents.

- ☒ 38. Bank statements for each open account (redact all but the last 4 digits of account numbers).
- ☐ 39. Bank reconciliation reports for each account.
- ☐ 40. Financial reports such as an income statement (profit & loss) and/or balance sheet.
- ☐ 41. Budget, projection, or forecast reports.
- ☐ 42. Project, job costing, or work-in-progress reports.

Exhibit A

Question 5-

I couldn't close all the old bank accounts until I received checks for the new DIP accounts.
There were also outstanding checks that were not deposited on a timely manner.

Exhibit B

Question 10-

Yes, because I couldn't write checks for the new accounts until I received checks.

Question 18-

I did allow the checks written before the filing of bankruptcy to clear the bank on the old accounts.

Exhibit C

Credit card receipts:	\$16,885.21
Cash receipts:	<u>\$25,432.11</u>
Total:	\$42,317.82

Exhibit D

Checks:

Check number	Date	Payee	Amount	Purpose
405	9/3/21	R&R Provisions	\$332.59	Food
406	9/3/21	Gross Foods	\$2,712.00	Food
407	9/6/21	Winding Creek Septic	\$360.00	Pump Service
408	9/10/21	Harry Heimbach	\$1038.00	Restaurant mortgage
409	9/10/21	Home City Ice Chest	\$424.00	Yearly rental ice of ice chest
410	9/10/21	Rittenhouse Plumbing	\$500.00	Drain cleaning
411	9/11/21	Shopper's Guide	\$92.00	Advertising
412	9/11/21	Gross Foods	\$3,945.04	Food
413	9/20/21	R&R Provisions	\$149.53	Food
414	9/22/21	Winding Creek Septic	\$360.00	Sewer Pump
415	9/24/21	Gross Foods	\$2,604.39	Food
416	9/26/21	Shopper's Guide	\$188.00	Advertising
417	9/28/21	Sysco Foods	\$1,137.43	Food
418	9/28/21	R&R Provisions	\$334.60	Food
419	9/30/21	Gross Foods	\$1,252.26	Food
420	9/30/21	Golden Waffle	\$350.41	Food
Total			\$17,070.25	

Exhibit D

Cash Purchases & Debit

Date	Payee	Amount	Purpose
9/3/21	Hearth Basket	\$201.33	Rolls
9/3/21	Bimbo	\$188.26	Bread
9/7/21	Citrus Produce	\$321.14	Produce
9/8/21	Derstein's Food	\$668.32	Food
9/10/21	Bimbo Food	\$201.16	Bread
9/10/21	Hearth Bakery	184.01	Rolls
9/14/21	Citrus Produce	\$388.90	Produce
9/14/21	Chubb Ins.	\$565.00	Insurance
9/16/21	PPL	\$1342.24	Electric
9/16/21	Verizon	\$205.79	Telephone
9/17/21	Hearth Bakery	\$134.98	Rolls
9/17/21			
9/21/21	Bimbo	\$211.06	Bread
9/24/21	Citrus Produce	\$281.01	Produce
9/24/21	Hearth Bakery	\$228.03	Rolls
9/28/21	Bimbo	\$210.11	Bread
9/28/21	Citrus Produce	\$314.15	Produce
9/28/21	Restaurant Store	\$1371.97	Restaurant goods
9/21	Amazon	\$425.78	Misc. goods
9/21	Band	\$2,450.00	
Total		\$9,893.24	

Exhibit D

Payroll: \$11,829.10

Repairs, store goods and miscellaneous: \$2,224.29

Exhibit E

Taxes- Quarterly (July, August, September)

PA Unemployment- \$479.50 due 10/29/2021

Local Berkheimer- \$174.25 due 10/29/2021

Federal- \$2,377.77 due 10/29/2021

Termac- \$678.44 due now

Whitetail Disposal- \$740.00 due 10/30/201

Total: \$4,449.96



Page 1 of 3
PA 09/30/21



719-71-01-00 20195 0 C 001 30 50 004
SCOTT A THOMAS
DBA STRAWBERRY FAMILY RESTAURANT
3152 MIDDLE CREEK RD
GILBERTSVILLE PA 19525-9465

Your account statement

For 09/30/2021

Contact us



BBT.com



(800) BANK-BBT or
(800) 226-5228

Coming soon

Important information about your transition from BB&T to Truist is on the way. You'll receive your details by mail in September 2021.

©2021, Truist Financial Corporation. Truist Bank, Member FDIC.

■ BUSINESS VALUE 200 3208

Account summary

Your previous balance as of 08/31/2021	\$2,900.93
Checks	- 16,810.04
Other withdrawals, debits and service charges	- 4,684.93
Deposits, credits and interest	+ 18,382.00
Your new balance as of 09/30/2021	= \$-212.04

Checks

DATE	CHECK #	AMOUNT(\$)
09/01	403	1,786.58
09/08	404	39.58
09/07	405	332.59
09/13	406	2,712.00
09/13	407	360.00
09/16	408	1,038.00

DATE	CHECK #	AMOUNT(\$)
09/20	409~	
09/28	410	500.00
09/14	411	92.00
09/21	412	3,945.34
09/20	413	149.53
09/17	414	360.00

DATE	CHECK #	AMOUNT(\$)
09/28	415	2,604.39
09/21	416	188.00
09/30	417	1,137.43
09/27	418	334.60
09/07	*9999	1,230.00

* indicates a skip in sequential check numbers above this item

~ indicates an electronically converted check. See "Other withdrawals, debits and service charges"

Total checks = \$16,810.04

Other withdrawals, debits and service charges

DATE	DESCRIPTION	AMOUNT(\$)
09/08	DEBIT CARD PURCHASE MONSTER SCOOTER PA 09-07 800-7980325 CO 4490	346.98
09/08	DEBIT CARD PURCHASE AMZN Mktp US*258WV 09-07 Amzn.com/bill WA 4490	98.00
09/08	DEBIT CARD PURCHASE AMZN Mktp US*2G35I 09-08 Amzn.com/bill WA 4490	60.41
09/14	DEBIT CARD PURCHASE RESTAURANTSTORE.CO 09-13 717-392-7974 PA 4490	108.59
09/14	ACH CORP DEBIT INS.PREM CHUBB-SCI Chubb, Chubb CUSTOMER ID SCI	565.00
09/16	ACH CORP DEBIT ELEC BILL PP STRAWBERRY FAMILY RE CUSTOMER ID 1154021030	1,338.74
09/16	TELEPHONE PAYMENT BILLPAYFEE BILLMATRIX 7934645102	3.50
09/16	TELEPHONE PAYMENT BILL PAY FIS*VERIZON 7934645101	205.79
09/20	DEBIT CARD PURCHASE RESTAURANTSTORE.CO 09-17 717-392-7974 PA 4490	787.63
09/20	DEBIT CARD PURCHASE RESTAURANTSTORE.CO 09-17 717-392-7974 PA 4490	439.32
09/20	DEBIT CARD PURCHASE RESTAURANTSTORE.CO 09-17 717-392-7974 PA 4490	36.43

continued

■ BUSINESS VALUE 200 3208 (continued)

DATE	DESCRIPTION	AMOUNT(\$)
09/20	CONVERTED CHECK - BOC CHECKPAYMT HOME CITY ICE 00409409	424.00
09/23	DEBIT CARD PURCHASE AMZN Mktp US*2C4CJ 09-22 Amzn.com/bill WA 4490	116.70
09/30	DEBIT CARD PURCHASE AMZN Mktp US*2C8U5 09-29 Amzn.com/bill WA 4490	80.75
09/30	DEBIT CARD PURCHASE AMZN Mktp US*2C6JD 09-29 Amzn.com/bill WA 4490	37.09
09/30	PRIOR DAY OD FEE-\$36/ITM	36.00
Total other withdrawals, debits and service charges		= \$4,684.93

Deposits, credits and interest

DATE	DESCRIPTION	AMOUNT(\$)
09/01	210901P2 Square Inc Strawberry Family Rest CUSTOMER ID L208651858067	267.77
09/02	210902P2 Square Inc Strawberry Family Rest CUSTOMER ID L208652157681	365.18
09/03	210903P2 Square Inc Strawberry Family Rest CUSTOMER ID L208652504976	624.70
09/07	210906P2 Square Inc Strawberry Family Rest CUSTOMER ID L208653103159	631.94
09/07	210907P2 Square Inc Strawberry Family Rest CUSTOMER ID L208653417524	995.44
09/07	210906P2 Square Inc Strawberry Family Rest CUSTOMER ID L208653103160	2,882.33
09/08	210908P2 Square Inc Strawberry Family Rest CUSTOMER ID L208653662690	276.03
09/09	210909P2 Square Inc Strawberry Family Rest CUSTOMER ID L208653985425	167.18
09/10	210910P2 Square Inc Strawberry Family Rest CUSTOMER ID L208654328571	314.44
09/13	210913P2 Square Inc Strawberry Family Rest CUSTOMER ID L208654893208	461.56
09/13	210913P2 Square Inc Strawberry Family Rest CUSTOMER ID L208654893209	2,748.57
09/14	210914P2 Square Inc Strawberry Family Rest CUSTOMER ID L208655231488	203.87
09/15	210915P2 Square Inc Strawberry Family Rest CUSTOMER ID L208655498054	292.86
09/16	210916P2 Square Inc Strawberry Family Rest CUSTOMER ID L208655817848	388.11
09/17	210917P2 Square Inc Strawberry Family Rest CUSTOMER ID L208656167007	338.95
09/20	210920P2 Square Inc Strawberry Family Rest CUSTOMER ID L208656752509	310.84
09/20	210920P2 Square Inc Strawberry Family Rest CUSTOMER ID L208656752510	2,457.97
09/21	210921P2 Square Inc Strawberry Family Rest CUSTOMER ID L208657087999	287.90
09/22	210922P2 Square Inc Strawberry Family Rest CUSTOMER ID L208657342198	295.52
09/23	210923P2 Square Inc Strawberry Family Rest CUSTOMER ID L208657659728	192.02
09/24	210924P2 Square Inc Strawberry Family Rest CUSTOMER ID L208658017355	345.50
09/27	210927P2 Square Inc Strawberry Family Rest CUSTOMER ID L208658629326	224.37
09/27	210927P2 Square Inc Strawberry Family Rest CUSTOMER ID L208658629327	2,533.46
09/28	210928P2 Square Inc Strawberry Family Rest CUSTOMER ID L208658930369	270.88
09/29	210929P2 Square Inc Strawberry Family Rest CUSTOMER ID L208659169480	249.90
09/30	210930P2 Square Inc Strawberry Family Rest CUSTOMER ID L208659509763	254.71
Total deposits, credits and interest		= \$18,382.00

Initiate Business CheckingSM

September 30, 2021 ■ Page 1 of 4



SCOTT A THOMAS DBA STRAWBERRY FAMILY
RESTAURANT, DEBTOR IN POSSESSION
CH 11 CASE # 21-12333(EPA)
3152 MIDDLE CREEK RD
GILBERTSVILLE PA 19525-9465

Questions?

Available by phone 24 hours a day, 7 days a week:
We accept all relay calls, including 711

1-800-CALL-WELLS (1-800-225-5935)

En español: 1-877-337-7454

Online: wellsfargo.com/biz

Write: Wells Fargo Bank, N.A. (345)
P.O. Box 6995
Portland, OR 97228-6995

Your Business and Wells Fargo

Visit wellsfargoworks.com to explore videos, articles, infographics, interactive tools, and other resources on the topics of business growth, credit, cash flow management, business planning, technology, marketing, and more.

Account options

A check mark in the box indicates you have these convenient services with your account(s). Go to wellsfargo.com/biz or call the number above if you have questions or if you would like to add new services.

Business Online Banking
Online Statements
Business Bill Pay
Business Spending Report
Overdraft Protection

<input checked="" type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>



IMPORTANT ACCOUNT INFORMATION

Revised USPS service standards effective 10/1/21

Effective October 1, 2021, the United States Postal Service (USPS) has revised its service standards for certain First-Class Mail items, resulting in a delivery window of up to five days. Please note this may delay your receipt of mail from us and our receipt of mail from you. Please take this change into account when mailing items to us via USPS.

Consider signing into Wells Fargo Online[®] for quicker access to your account information.

We're making important changes to the terms and conditions of some of our accounts. If these changes affect you, they will be included in the Important Account Information section associated with your specific account.

September 30, 2021 ■ Page 2 of 4



Statement period activity summary

Beginning balance on 9/7	\$0.00
Deposits/Credits	200.00
Withdrawals/Debits	- 37.07
Ending balance on 9/30	\$162.93

Account number: 8206

SCOTT A THOMAS DBA STRAWBERRY FAMILY
RESTAURANT, DEBTOR IN POSSESSION
CH 11 CASE #21-12333(EPA)

Pennsylvania account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): 031000503

For Wire Transfers use

Routing Number (RTN): 121000248

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo branch.

Transaction history

Date	Check Number	Description	Deposits/ Credits	Withdrawals/ Debits	Ending daily balance
9/7		Deposit	200.00		200.00
9/14		Harland Clarke Check/Acc. # Scott A Thomas		37.07	162.93
Ending balance on 9/30					162.93
Totals			\$200.00	\$37.07	

The Ending Daily Balance does not reflect any pending withdrawals or holds on deposited funds that may have been outstanding on your account when your transactions posted. If you had insufficient available funds when a transaction posted, fees may have been assessed.

Monthly service fee summary

For a complete list of fees and detailed account information, see the disclosures applicable to your account or talk to a banker. Go to [wellsfargo.com/feefaq](https://www.wellsfargo.com/feefaq) for a link to these documents, and answers to common monthly service fee questions.

Fee period 09/07/2021 - 09/30/2021

Standard monthly service fee \$10.00

You paid \$0.00

We waived the fee this fee period to allow you to meet the requirements to avoid the monthly service fee. Your fee waiver is about to expire. You will need to meet one of the requirements to avoid the monthly service fee.

How to avoid the monthly service fee

Have any **ONE** of the following account requirements

- Average ledger balance
- Minimum daily balance

Minimum required

This fee period

\$1,000.00

\$174.00 ☐

\$500.00

\$162.93 ☐

C101

Account transaction fees summary

Service charge description	Units used	Units Included	Excess units	Service charge per excess units (\$)	Total service charge (\$)
Cash Deposited (\$)	200	5,000	0	0.0030	0.00
Transactions	0	100	0	0.50	0.00
Total service charges					\$0.00

Fill in this information to identify the case:

Debtor Name Scott A. Thomas

United States Bankruptcy Court for the: Eastern District of Pennsylvania



Case number: 21-12333

☐ Check if this is an amended filing

Official Form 425C

Monthly Operating Report for Small Business Under Chapter 11

12/17

Month: October

Date report filed: 11/21/2021
MM / DD / YYYY

Line of business: Restaurant

NAISC code: _____

In accordance with title 28, section 1746, of the United States Code, I declare under penalty of perjury that I have examined the following small business monthly operating report and the accompanying attachments and, to the best of my knowledge, these documents are true, correct, and complete.

Responsible party: Scott A. Thomas

Original signature of responsible party

Scott A. Thomas

Printed name of responsible party

Scott A. Thomas

1. Questionnaire

Answer all questions on behalf of the debtor for the period covered by this report, unless otherwise indicated.

	Yes	No	N/A
If you answer No to any of the questions in lines 1-9, attach an explanation and label it Exhibit A.			
1. Did the business operate during the entire reporting period?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Do you plan to continue to operate the business next month?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Have you paid all of your bills on time?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Did you pay your employees on time?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Have you deposited all the receipts for your business into debtor in possession (DIP) accounts?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Have you timely filed your tax returns and paid all of your taxes?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Have you timely filed all other required government filings?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Are you current on your quarterly fee payments to the U.S. Trustee or Bankruptcy Administrator?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9. Have you timely paid all of your insurance premiums?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If you answer Yes to any of the questions in lines 10-16, attach an explanation and label it Exhibit B.			
10. Do you have any bank accounts open other than the DIP accounts?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Have you sold any assets other than inventory?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12. Have you sold or transferred any assets or provided services to anyone related to the DIP in any way?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13. Did any insurance company cancel your policy?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14. Did you have any unusual or significant unanticipated expenses?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15. Have you borrowed money from anyone or has anyone made any payments on your behalf?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Has anyone made an investment in your business?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Debtor Name Scott A. Thomas

Case number 21-12333

17. Have you paid any bills you owed before you filed bankruptcy?

☐ ☒ ☐

18. Have you allowed any checks to clear the bank that were issued before you filed bankruptcy?

☒ ☐ ☐

2. Summary of Cash Activity for All Accounts

19. Total opening balance of all accounts

\$ 3,066.94

This amount must equal what you reported as the cash on hand at the end of the month in the previous month. If this is your first report, report the total cash on hand as of the date of the filing of this case.

20. Total cash receipts

Attach a listing of all cash received for the month and label it *Exhibit C*. Include all cash received even if you have not deposited it at the bank, collections on receivables, credit card deposits, cash received from other parties, or loans, gifts, or payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit C*.

Report the total from *Exhibit C* here.

\$ 82,498.56

21. Total cash disbursements

Attach a listing of all payments you made in the month and label it *Exhibit D*. List the date paid, payee, purpose, and amount. Include all cash payments, debit card transactions, checks issued even if they have not cleared the bank, outstanding checks issued before the bankruptcy was filed that were allowed to clear this month, and payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit D*.

Report the total from *Exhibit D* here.

- \$ 46,806.39

22. Net cash flow

Subtract line 21 from line 20 and report the result here.

+ \$ 35,692.17

This amount may be different from what you may have calculated as *net profit*.

23. Cash on hand at the end of the month

Add line 22 + line 19. Report the result here.

Report this figure as the *cash on hand at the beginning of the month* on your next operating report.

= \$ 38,759.11

This amount may not match your bank account balance because you may have outstanding checks that have not cleared the bank or deposits in transit.

3. Unpaid Bills

Attach a list of all debts (including taxes) which you have incurred since the date you filed bankruptcy but have not paid. Label it *Exhibit E*. Include the date the debt was incurred, who is owed the money, the purpose of the debt, and when the debt is due. Report the total from *Exhibit E* here.

24. Total payables

\$ 0.00

(*Exhibit E*)

Debtor Name Scott A. Thomas

Case number 21-12333

4. Money Owed to You

Attach a list of all amounts owed to you by your customers for work you have done or merchandise you have sold. Include amounts owed to you both before, and after you filed bankruptcy. Label it *Exhibit F*. Identify who owes you money, how much is owed, and when payment is due. Report the total from *Exhibit F* here.

25. Total receivables \$ 0.00
(Exhibit F)

5. Employees

26. What was the number of employees when the case was filed? 5
27. What is the number of employees as of the date of this monthly report? 5

6. Professional Fees

28. How much have you paid this month in professional fees related to this bankruptcy case? \$ 0.00
29. How much have you paid in professional fees related to this bankruptcy case since the case was filed? \$ 10,000.00
30. How much have you paid this month in other professional fees? \$ 0.00
31. How much have you paid in total other professional fees since filing the case? \$ 0.00

7. Projections

Compare your actual cash receipts and disbursements to what you projected in the previous month. Projected figures in the first month should match those provided at the initial debtor interview, if any.

	<u>Column A</u>		<u>Column B</u>		<u>Column C</u>
	Projected	—	Actual	=	Difference
	Copy lines 35-37 from the previous month's report.		Copy lines 20-22 of this report.		Subtract Column B from Column A.
32. Cash receipts	\$ <u> </u>	—	\$ <u> </u>	=	\$ <u> </u>
33. Cash disbursements	\$ <u> </u>	—	\$ <u> </u>	=	\$ <u> </u>
34. Net cash flow	\$ <u> </u>	—	\$ <u> </u>	=	\$ <u> </u>
35. Total projected cash receipts for the next month:					\$ <u> </u>
36. Total projected cash disbursements for the next month:					— \$ <u> </u>
37. Total projected net cash flow for the next month:					= \$ <u> </u>

Debtor Name Scott A. Thomas

Case number 21-12333

8. Additional Information

If available, check the box to the left and attach copies of the following documents.

- ☒ 38. Bank statements for each open account (redact all but the last 4 digits of account numbers).
- ☐ 39. Bank reconciliation reports for each account.
- ☐ 40. Financial reports such as an income statement (profit & loss) and/or balance sheet.
- ☐ 41. Budget, projection, or forecast reports.
- ☐ 42. Project, job costing, or work-in-progress reports.

Exhibit A

Question 5-

I didn't have the credit card setup until 10/12/21 on the new account.

Exhibit B

Question 10-

Waiting for all checks and debits to clear.

Question 15-

Accepted an advance on future credit card sales of \$31,000 on 10/20/21.

Exhibit C

Credit card receipts:	\$20,819.18
Cash receipts:	\$30,679.38
Square, Inc. loan:	<u>\$31,000.00</u>
Total:	\$82,498.56

Exhibit D

Checks: Truist and Wells Fargo Accounts

Date	Payee	Amount	Purpose
10/1/21	Shoppers' Guide	\$94.00	Advertising
10/4/21	R&R Provisions	\$296.10	Food
10/4/21	Golden Waffle	\$350.40	Food
10/4/21	Gross Foods	\$1,032.90	Food
10/10/21	Selene Finance	\$2,313.60	Mortgage
10/11/21	Gross Foods	\$1,148.50	Food
10/12/21	Sysco	\$985.76	Food
10/15/21	Gross Foods	\$2,709.90	Food
10/20/21	Gross Foods	\$2,422.21	Food
10/20/21	Shoppers' Guide	\$85.00	Advertising
10/20/21	Medicare Insurance	\$1,039.50	Insurance
10/21/21	P&G Trading Co.	\$1,623.32	Food?
10/26/21	R& R Provisions	\$609.75	Food
10/27/21	Shoppers' Guide	\$105.00	Advertising
10/27/21	Gross Foods	\$2,317.01	Food
10/28/21	P&G Trading	\$541.12	Food
10/28/21	Community connection	\$300.00	Advertising
10/30/21	Gross Foods	\$3,122.42	Food
Total		\$21,096.49	

Tax payments:

10/15/21	Commonwealth of PA	\$148.88
10/21/21	Dept. of Treasury	\$322.00
10/25/21	Berks County	\$55.00
10/28/21	Dept. of Treasury	\$1,079.99
10/29/21	Berkheimer	\$39.20
10/29/21	Berkheimer	<u>\$135.05</u>
		\$1,780.12

Exhibit D

Cash Purchases and Debits

Payee	Amount	Purpose
Citrus Produce	\$1,468.83	Produce
Providence Real Estate Management	\$1,000.00	Storage trailer
Faraco Knife Service	\$80.00	Knives
Hearth Bakery	\$523.10	Rolls and bread
Unifirst linens	\$320.00	Towels and aprons
Ellis Coffee	\$364.00	Coffee
Home City Ice	\$234.40	Ice
Bread Barn	\$120.00	Bread and rolls
Clover Farms Dairy	\$715.53	Dairy products
Bimbo	\$689.86	Bread and rolls
Bands	\$1,500.00	Live entertainment
Repairs, store misc.	\$1,945.17	Repairs
Gross Foods	\$3,122.42	Food
Amazon	\$313.39	Misc. goods
Restaurant Store	\$82.62	Restaurant goods
NFIB	\$150.00	Trade group
Whitetail Disposal	\$976.82	Trash removal
Bank fees	\$143.00	Bank fees
Total:	\$10,627.52	

Payroll: \$13,302.26

Exhibit E

10/21/2021 Advance from Square, Inc., Debtor's credit card processor, of \$31,000 to purchase certain equipment for the restaurant. 14% to be deducted from future credit card sales until repaid.



719-71-01-00 20195 0 C 001 30 50 004
 SCOTT A THOMAS
 DBA STRAWBERRY FAMILY RESTAURANT
 3152 MIDDLE CREEK RD
 GILBERTSVILLE PA 19525-9465

Your account statement

For 10/29/2021

Contact us



Truist.com



(844) 4TRUIST or
 (844) 487-8478

■ BUSINESS VALUE 200 CHECKING [REDACTED] 3208

Account summary

Your previous balance as of 09/30/2021	\$-212.04
Checks	- 5,469.06
Other withdrawals, debits and service charges	- 1,482.66
Deposits, credits and interest	+ 7,453.46
Your new balance as of 10/29/2021	= \$289.70

Checks

DATE	CHECK #	AMOUNT(\$)	DATE	CHECK #	AMOUNT(\$)	DATE	CHECK #	AMOUNT(\$)
10/04	348	296.10	10/04	*420	350.40	10/01	422	94.00
10/12	349	985.76	10/04	421	1,032.90	10/15	*424	2,709.90

* indicates a skip in sequential check numbers above this item

Total checks = \$5,469.06

Other withdrawals, debits and service charges

DATE	DESCRIPTION	AMOUNT(\$)
10/01	DEBIT CARD PURCHASE AMZN Mktp US*2C61A 10-01 Amzn.com/bill WA 4490	82.62
10/01	PRIOR DAY RET ITEM FEE-\$36/ITM	72.00
10/12	DEBIT CARD PURCHASE AMZN Mktp US*2783V 10-11 Amzn.com/bill WA 4490	41.80
10/13	DEBIT CARD PURCHASE AMZN Mktp US*276FT 10-13 Amzn.com/bill WA 4490	123.42
10/19	RETURNED ITEM FEE	36.00
10/25	DEBIT CARD PURCHASE WHITETAIL DISPOSAL 10-22 610-7540103 PA 4490	82.00
10/25	INTERNET PAYMENT ACH WHITETAIL DISPOS 610-754-0103	894.82
10/27	INTERNET PAYMENT 8006342669 NFIB	150.00

Total other withdrawals, debits and service charges

= \$1,482.66

Deposits, credits and interest

DATE	DESCRIPTION	AMOUNT(\$)
10/01	211001P2 Square Inc Strawberry Family Rest CUSTOMER ID L208659838572	518.28
10/04	211004P2 Square Inc Strawberry Family Rest CUSTOMER ID L208660423500	267.49
10/04	211004P2 Square Inc Strawberry Family Rest CUSTOMER ID L208660423501	2,609.52
10/05	211005P2 Square Inc Strawberry Family Rest CUSTOMER ID L208660782987	239.21
10/06	211006P2 Square Inc Strawberry Family Rest CUSTOMER ID L208661022499	339.80
10/07	211007P2 Square Inc Strawberry Family Rest CUSTOMER ID L208661355279	178.15
10/08	211008P2 Square Inc Strawberry Family Rest CUSTOMER ID L208661679481	260.63
10/12	211011P2 Square Inc Strawberry Family Rest CUSTOMER ID L208662285102	522.33
10/12	211011P2 Square Inc Strawberry Family Rest CUSTOMER ID L208662285103	2,363.37
10/14	DEBIT CARD RETURN AMZN Mktp US 10-13 Amzn.com/bill WA 4490	72.06

continued

DATE	DESCRIPTION	AMOUNT(\$)
10/20	DEBIT CARD RETURN RESTAURANTSTORE.CO 10-18 717-3927974 PA 4490	82.62
Total deposits, credits and interest		= \$7,453.46

October 31, 2021 ■ Page 2 of 7



Summary of accounts

Checking/Prepaid and Savings

Account	Page	Account number	Ending balance last statement	Ending balance this statement
Initiate Business Checking SM	2	██████████8206	162.93	27,708.70
Business Market Rate Savings	4	██████████3200	152.15	2,327.04
Total deposit accounts			\$315.08	\$30,035.74

Initiate Business CheckingSM

Statement period activity summary

Beginning balance on 10/1	\$162.93
Deposits/Credits	43,751.11
Withdrawals/Debits	- 16,205.34
Ending balance on 10/31	\$27,708.70

Account number: ██████████8206

SCOTT A THOMAS DBA STRAWBERRY FAMILY
RESTAURANT, DEBTOR IN POSSESSION
CH 11 CASE # 21-12333(EPA)

Pennsylvania account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): ██████████

For Wire Transfers use

Routing Number (RTN): ██████████

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo branch.

Transaction history

Date	Check Number	Description	Deposits/ Credits	Withdrawals/ Debits	Ending daily balance
10/12		Square Inc Sdv-Vrfy 211012 T200411458555 Scott A Thomas	0.01		
10/12		Square Inc 211012P2 211012 L208662666565 Scott A Thomas	253.22		
10/12		Deposit	2,350.00		
10/12		Deposit	215.70		
10/12		< Business to Business ACH Debit - Square Inc Sdv-Vrfy 211012 T200411458556 Scott A Thomas		0.01	2,981.85
10/13		Square Inc 211013P2 211013 L208662990900 Scott A Thomas	280.78		3,262.63
10/14		Square Inc 211014P2 211014 L208663321028 Scott A Thomas	192.59		3,455.22
10/15		Square Inc 211015P2 211015 L208663656817 Scott A Thomas	285.80		3,741.02
10/18		Square Inc 211018P2 211018 L208664318314 Scott A Thomas	369.68		
10/18		Square Inc 211018P2 211018 L208664318315 Scott A Thomas	2,988.82		7,099.52
10/19		Square Inc 211019P2 211019 L208664527541 Scott A Thomas	98.89		
10/19	1001	Check		2,313.60	4,884.81
10/20		Square Inc 211020P2 211020 L208664851599 Scott A Thomas	427.28		
10/20		Square Inc Sq Cap9960 211019 T200413853467 Scott A Thomas	31,000.00		
10/20		Online Transfer to Scott A Thomas Business Market Rate Savings xxxxxx3200 Ref #b0Cnx2Qyr on 10/20/21		4,000.00	32,312.09
10/21		Square Inc 211021P2 211021 L208665175835 Scott A Thomas	259.84		
10/21	1010	Check		85.00	
10/21	1009	Check		1,623.32	
10/21	1002	Check		1,148.52	29,715.09

October 31, 2021 ■ Page 3 of 7

**WELLS
FARGO****Transaction history (continued)**

Date	Check Number	Description	Deposits/ Credits	Withdrawals/ Debits	Ending daily balance
10/22		Square Inc 211022P2 211022 L208665518999 Scott A Thomas	495.84		30,210.93
10/25		Square Inc 211025P2 211025 L208666177448 Scott A Thomas	668.61		
10/25		Square Inc 211025P2 211025 L208666177449 Scott A Thomas	2,724.61		
10/25	1008	Check		2,422.41	31,181.74
10/26		Square Inc 211026P2 211026 L208666389956 Scott A Thomas	186.11		31,367.85
10/27		Square Inc 211027P2 211027 L208666712527 Scott A Thomas	343.94		
10/27	1015	Check		105.00	
10/27	^ 1011	Cms Medicare Payment 211026 1011 Pusb04212992065797		1,039.60	
10/27	1012	Check		609.75	29,957.44
10/28		Square Inc 211028P2 211028 L208667037725 Scott A Thomas	169.38		
10/28	1016	Check		541.12	
10/28	1014	Check		2,317.01	27,268.69
10/29		Square Inc 211029P2 211029 L208667377364 Scott A Thomas	440.01		27,708.70
Ending balance on 10/31					27,708.70
Totals			\$43,751.11	\$16,205.34	

The Ending Daily Balance does not reflect any pending withdrawals or holds on deposited funds that may have been outstanding on your account when your transactions posted. If you had insufficient available funds when a transaction posted, fees may have been assessed.

^A **Converted check:** Check converted to an electronic format by your payee or designated representative. Checks converted to electronic format cannot be returned, copied or imaged.

[<] **Business to Business ACH:** If this is a business account, this transaction has a return time frame of one business day from post date. This time frame does not apply to consumer accounts.

Summary of checks written (checks listed are also displayed in the preceding Transaction history)

Number	Date	Amount	Number	Date	Amount	Number	Date	Amount
1001	10/19	2,313.60	1010	10/21	85.00	1014 *	10/28	2,317.01
1002	10/21	1,148.52	1011	10/27	1,039.60	1015	10/27	105.00
1008 *	10/25	2,422.41	1012	10/27	609.75	1016	10/28	541.12
1009	10/21	1,623.32						

* Gap in check sequence.

Monthly service fee summary

For a complete list of fees and detailed account information, see the disclosures applicable to your account or talk to a banker. Go to wellsfargo.com/feefaq for a link to these documents, and answers to common monthly service fee questions.

Fee period 10/01/2021 - 10/31/2021

Standard monthly service fee \$10.00

You paid \$0.00

We waived the fee this fee period to allow you to meet the requirements to avoid the monthly service fee. This is the final period with the fee waived. For the next fee period, you need to meet one of the requirements to avoid the monthly service fee.

How to avoid the monthly service fee

Have any ONE of the following account requirements

- Average ledger balance
- Minimum daily balance

Minimum required

\$1,000.00
\$500.00

This fee period

\$12,589.00 ☒
\$162.93 ☐

The Monthly service fee summary fee period ending date shown above includes a Saturday, Sunday, or holiday which are non-business days. Transactions occurring after the last business day of the month will be included in your next fee period.

C1/C1

October 31, 2021 ■ Page 4 of 7

**Account transaction fees summary**

Service charge description	Units used	Units included	Excess units	Service charge per excess units (\$)	Total service charge (\$)
Cash Deposited (\$)	1,000	5,000	0	0.0030	0.00
Transactions	18	100	0	0.50	0.00
Total service charges					\$0.00

Other Wells Fargo Benefits

Our National Business Banking Center customer service number 1-800-CALL-WELLS (1-800-225-5935) hours of operation have temporarily changed to 7:00 a.m. to 11:00 p.m. Eastern Time, Monday through Saturday and Sunday 9:00 a.m. to 10:00 p.m. Eastern Time. Access to our automated banking system, the ability to report a fraud claim on your business credit or debit card, and access to report a lost or stolen business card will continue to be available 24 hours a day, 7 days per week. Thank you for banking with Wells Fargo. We appreciate your business.

Business Market Rate Savings**Statement period activity summary**

Beginning balance on 10/13	\$152.15
Deposits/Credits	4,000.01
Withdrawals/Debits	- 1,825.12
Ending balance on 10/31	\$2,327.04

Account number: [REDACTED] 3200

SCOTT A THOMAS DBA STRAWBERRY FAMILY
RESTAURANT, DEBTOR IN POSSESSION
CH 11 CASE # 21-12333(EPA)

Pennsylvania account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Interest summary

Interest paid this statement	\$0.01
Average collected balance	\$2,037.98
Annual percentage yield earned	0.01%
Interest earned this statement period	\$0.01
Interest paid this year	\$0.01

Transaction history

Date	Check Number	Description	Deposits/ Credits	Withdrawals/ Debits	Ending daily balance
10/15	<	Business to Business ACH Debit - Commwltthofpa Int Paemploytx 210930 xxxxx0094 Txp*94130319 *1051 *210930*T*0000014888* *P		148.88	3.27
10/18		NSF Return Item Fee for a Transaction Received on 10/15 \$1,079.99 IRS Usalaxpymt 101521 270168815452 022 Scott A Thomas		35.00	-31.73

October 31, 2021 ■ Page 5 of 7

**WELLS
FARGO****Transaction history (continued)**

Date	Check Number	Description	Deposits/ Credits	Withdrawals/ Debits	Ending daily balance
10/20		Online Transfer From Scott A Thomas Business Checking xxxxxx8206 Ref #lb0Cnx2Qyr on 10/20/21	4,000.00		
10/20	1021	Check		332.00	3,638.27
10/25	1022	Check		55.00	3,581.27
10/28	<	Business to Business ACH Debit - IRS Usataxpymt 102821 270170114361002 Scott A Thomas		1,079.99	2,501.28
10/29		Berk Tax Pmt Emp Emp Webpay 211029 Erlst725770 Strawberry House Famil		39.20	
10/29		Berk Tax Pmt Emp Emp Webpay 211029 Erfin1492638 Strawberry House Famil		135.05	
10/29		Interest Payment	0.01		2,327.04
Ending balance on 10/31					2,327.04
Totals			\$4,000.01	\$1,825.12	

The Ending Daily Balance does not reflect any pending withdrawals or holds on deposited funds that may have been outstanding on your account when your transactions posted. If you had insufficient available funds when a transaction posted, fees may have been assessed.

< **Business to Business ACH:** If this is a business account, this transaction has a return time frame of one business day from post date. This time frame does not apply to consumer accounts.

Summary of checks written (checks listed are also displayed in the preceding Transaction history)

Number	Date	Amount	Number	Date	Amount
1021	10/20	332.00	1022	10/25	55.00

Items returned unpaid

Date	Description	Amount
10/18	IRS Usataxpymt 101521 270168815452022 Scott A Thomas Reference # 061036010072935	1,079.99

Monthly service fee summary

For a complete list of fees and detailed account information, see the disclosures applicable to your account or talk to a banker. Go to wellsfargo.com/feefaq for a link to these documents, and answers to common monthly service fee questions.

Fee period 10/01/2021 - 10/31/2021	Standard monthly service fee \$5.00	You paid \$0.00
We waived the fee this fee period to allow you to meet the requirements to avoid the monthly service fee. This is the final period with the fee waived. For the next fee period, you need to meet one of the requirements to avoid the monthly service fee.		
How to avoid the monthly service fee	Minimum required	This fee period
Have any ONE of the following account requirements		
• Minimum daily balance	\$300.00	-\$31.73 <input type="checkbox"/>
• Total automatic transfers from an eligible Wells Fargo business checking account	\$25.00	\$0.00 <input type="checkbox"/>
The Monthly service fee summary fee period ending date shown above includes a Saturday, Sunday, or holiday which are non-business days. Transactions occurring after the last business day of the month will be included in your next fee period.		

October 31, 2021 ■ Page 6 of 7



Account transaction fees summary

<i>Service charge description</i>	<i>Units used</i>	<i>Units included</i>	<i>Excess units</i>	<i>Service charge per excess units (\$)</i>	<i>Total service charge (\$)</i>
Deposited Items	0	20	0	0.50	0.00
Cash Deposited (\$)	0	5,000	0	0.0030	0.00
Total service charges					\$0.00

October 31, 2021 ■ Page 2 of 4



Get started at wellsfargo.com/personalloan.

Statement period activity summary

Beginning balance on 10/13	\$174.00
Deposits/Additions	0.00
Withdrawals/Subtractions	- 0.00
Ending balance on 10/31	\$174.00

Account number: [REDACTED] 4446

SCOTT A THOMAS
DEBTOR IN POSSESSION
CH 11 CASE # 21-12333(EPA)

Pennsylvania account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): 031000503

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo branch.

Monthly service fee summary

For a complete list of fees and detailed account information, see the disclosures applicable to your account or talk to a banker. Go to wellsfargo.com/feefaq for a link to these documents, and answers to common monthly service fee questions.

Fee period 10/13/2021 - 10/31/2021

Standard monthly service fee \$10.00

You paid \$0.00

We waived the fee this fee period to allow you to meet the requirements to avoid the monthly service fee. This is the final period with the fee waived. For the next fee period, you need to meet one of the requirements to avoid the monthly service fee.

How to avoid the monthly service fee

Have any **ONE** of the following account requirements

- Minimum daily balance
- Total amount of qualifying direct deposits
- Age of primary account owner
- The fee is waived when the account is linked to a Wells Fargo Campus ATM or Campus Debit Card

Minimum required

\$500.00

\$500.00

17 - 24

This fee period

\$174.00

\$0.00

☐

☐

☐

The Monthly service fee summary fee period ending date shown above includes a Saturday, Sunday, or holiday which are non-business days.

Transactions occurring after the last business day of the month will be included in your next fee period.

RC/RC



IMPORTANT ACCOUNT INFORMATION

Other Wells Fargo Benefits

Effective December 1, 2021, there is no outgoing wire fee when customers send an outgoing international wire in foreign currency using the Wells Fargo Mobile[®] app or Wells Fargo Online[®]. Otherwise, the outgoing international foreign currency wire fee is \$35.

In addition to the transfer fee, Wells Fargo makes money when it converts one currency to another currency for you. For additional information related to Wires and foreign currency, please see wellsfargo.com/online-banking/transfers/online-wires-terms-upcoming.

Can we reach you when it's really important?

Don't miss suspicious-activity alerts and critical account information. Please make sure your contact information is current by:

- Signing on to wellsfargo.com or the Wells Fargo Mobile[®] app and navigating to the Update Contact Information page via My Profile
- Contacting the phone number at the top of your statement